ARMY ROTC CADET FOR A DAY REGISTRATION

Please type or write legibly, then scan and email this completed form and the Army Waiver no later than **2 weeks prior to your arrival to** lawrence.v.jenkins@ku.edu

NAME:
(print: Last Name, First Name, MI)
Home Address:
Phone Number:
Email Address:
Please Circle: MALE FEMALE
Date and Lab you want to attend:
Select Stay: Option 1 (Overnight) Option 2 (Day Option)
Date of Birth:
High Schoo <mark>l Name, City, State:</mark>
High School Grad Date:
University of Kansas University of Saint Mary Baker University Washburn University Haskell Indian Nations University Undecided/Other: What major are you interested in pursuing? What specific questions do you have about Army ROTC and the Jayhawk Battalion?
What things would you like to see or do while on campus?
T-Shirt Size (please circle): SMALL MEDIUM LARGE X-LARGE
Allergies/Medication/Medical Information/Physical Limitations:
Emergency Contact (Name/Relationship/Phone):